

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
Office Use Only CENTER

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5
2016 DEC -7 AM 11:51

EMPOWERING EACH COMMUNITY PAC

ADDRESS (number and street)

911 SILVER SPRING AVENUE

Suite 1104

☐ Check if different
than previously
reported. (ACC)

SILVER SPRING

MD

20910-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00426122

3. IS THIS
REPORT

☒ NEW
(N)

OR

☐ AMENDED
(A)

4. TYPE OF REPORT
(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

MM / DD / YYYY

in the
State of

MM / DD / YYYY

(d) 30-Day
POST-Election
Report for the:

- ☒ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

MM / DD / YYYY

in the
State of

MM / DD / YYYY

5. Covering Period

MM / DD / YYYY

through

MM / DD / YYYY

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

THOMAS A. Gentile

Signature of Treasurer

Thomas A. Gentile

Date

MM / DD / YYYY

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

EMPOWERING EACH COMMUNITY PAC

Report Covering the Period:

From:

10 ' 20 ' 2016

To:

11 ' 28 ' 2016

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand
January 1, **2016**

24,718.25

(b) Cash on Hand at
Beginning of Reporting Period.....

3,973.31

(c) Total Receipts (from Line 19).....

25,700.00

50,700.00

(d) Subtotal (add Lines 6(b) and
6(c) for Column A and Lines
6(a) and 6(c) for Column B).....

29,673.31

75,418.25

7. Total Disbursements (from Line 31).....

10,309.26

56,054.20

8. Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d)).....

19,364.05

19,364.05

9. Debts and Obligations Owed **TO**
the Committee (Itemize all on
Schedule C and/or Schedule D).....

0

10. Debts and Obligations Owed **BY**
the Committee (Itemize all on
Schedule C and/or Schedule D).....

0



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

EMPOWERING EACH COMMUNITY PAC

Report Covering the Period:

From:

10 ' 20 ' 2016

To:

11 ' 28 ' 2016

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

- (a) Individuals/Persons Other Than Political Committees
(i) Itemized (use Schedule A).....

1770000

1770000

- (ii) Unitemized.....

0

0

- (iii) TOTAL (add Lines 11(a)(i) and (ii)).....

1770000

1770000

- (b) Political Party Committees.....

0

0

- (c) Other Political Committees (such as PACs).....

800000

3300000

- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....

2570000

5070000

12. Transfers From Affiliated/Other Party Committees.....

0

0

13. All Loans Received.....

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0

0

17. Other Federal Receipts (Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....

0

0

- (b) Levin Funds (from Schedule H5).....

0

0

- (c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....

2570000

5070000

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....

2570000

5070000

NO DUPLICATION

Page 4

COLUMN B
Calendar Year-to-Date

- [illegible]

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2570000	5070000
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2570000	5070000
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2655926	3668420
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	655926	3668420

201612070300122584

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 1 OF 4	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

EMPOWERING EACH COMMUNITY PAC

A. Full Name (Last, First, Middle Initial)
HECKLER ALEXANDER P

Mailing Address
436 W. 51st Street

City MIAMI BEACH State FL Zip Code 33140

FEC ID number of contributing federal political committee. C

Name of Employer LSN PARTNERS Occupation ATTORNEY

Receipt For:
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

10 / 24 / 2016

Amount of Each Receipt this Period

3000.00

B. Full Name (Last, First, Middle Initial)
STIEFEL BARBARA A.

Mailing Address
700 CORAL WAY #3

City CORAL GABLES State FL Zip Code 33134

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation PHILANTHROPIST

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

10 / 24 / 2016

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)
AUGUSTIN GENELLE

Mailing Address
8260 NE 2nd AVE.

City MIAMI State FL Zip Code 33138

FEC ID number of contributing federal political committee. C

Name of Employer Gmhetc, INC. Occupation I.T. DIRECTOR

Receipt For:
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt

10 / 24 / 2016

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....▶

5700.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2 OF 4
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

EMPOWERING EACH COMMUNITY PAC

Full Name (Last, First, Middle Initial)

A. JEAN ALAIN

Mailing Address

401 E. LAS OLAS BLVD. #130

City

FT. LAUDERDALE

State

FLORIDA

Zip Code

33301

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE AUGUST COMPANY

Occupation

CONSULTANT

Receipt For:

☐

Primary

☒

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

10 / 24 / 2016

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

B. EXUME, REMOND

Mailing Address

1998 NE 176th STREET

City

NORTH MIAMI BEACH

State

FLORIDA

Zip Code

33162

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐

Primary

☒

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 24 / 2016

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. MAIGNAN, JEAN PATRICK

Mailing Address

510 N.E. 167th STREET

City

MIAMI

State

FLORIDA

Zip Code

33162

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐

Primary

☒

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 24 / 2016

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 3 OF 4	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

EMPOWERING EACH COMMUNITY PAC

Full Name (Last, First, Middle Initial)

A. HIGHTOWER STEPHEN L

Mailing Address

4700 DEER CREEK

City

Middletown

State

OHIO

Zip Code

45042

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hightower Petroleum

Occupation

C.E.O.

Receipt For:

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

100000

Date of Receipt

11' 03' 2016

Amount of Each Receipt this Period

100000

Full Name (Last, First, Middle Initial)

B. ZIENTZ, MARK L

Mailing Address

9130 DADELAND BLVD.

City

MIAMI

State

FLORIDA

Zip Code

33156

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

100000

Date of Receipt

10' 24' 2016

Amount of Each Receipt this Period

100000

Full Name (Last, First, Middle Initial)

C. RAMKHELAN, DHANMATHIE

Mailing Address

7320 ORLEANS Street

City

Hollywood

State

FLORIDA

Zip Code

33023

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

100000

Date of Receipt

10' 24' 2016

Amount of Each Receipt this Period

100000

SUBTOTAL of Receipts This Page (optional).....

300000

TOTAL This Period (last page this line number only).....

2016-12-07 03:00:00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 4 OF 4
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

EMPOWERING EACH COMMUNITY PAC

A. Full Name (Last, First, Middle Initial)
JEAN-Gilles, Michele M.
 Mailing Address
12901 BISCAYNE BAY DRIVE
 City **NORTH MIAMI** State **FLORIDA** Zip Code **33181**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **FLORIDA INTERNATIONAL U.** Occupation **PSYCHOLOGIST**
 Receipt For: ☐ Primary ☒ General ☐ Other (specify) ▼
 Aggregate Year-to-Date ▼ **1,000.00**

Date of Receipt

10 / **24** / **2016**

Amount of Each Receipt this Period

1,000.00

B. Full Name (Last, First, Middle Initial)
PIERRE, LAURINUS
 Mailing Address
8260 NE 2d AVENUE
 City **MIAMI** State **FLORIDA** Zip Code **33138**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **PHYSICIAN** Occupation **GMHETC, INC**
 Receipt For: ☐ Primary ☒ General ☐ Other (specify) ▼
 Aggregate Year-to-Date ▼ **5,000.00**

Date of Receipt

10 / **24** / **2016**

Amount of Each Receipt this Period

5,000.00

C. Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation **G**
 Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶

6,000.00

TOTAL This Period (last page this line number only).....▶

17,700.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

EMPOWERING EACH COMMUNITY PAC

A. Full Name (Last, First, Middle Initial)
DELOITTE Political Action Committee

Mailing Address
P.O. BOX 365

City
WASHINGTON

State
DC

Zip Code
20044

FEC ID number of contributing federal political committee.
C 00211318

Name of Employer
Occupation

Receipt For:
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
300000

Date of Receipt

10 / 24 / 2016

Amount of Each Receipt this Period

300000

B. Full Name (Last, First, Middle Initial)
LETTER CARRIER POLITICAL FUND

Mailing Address
100 INDIANA AVE. N.W.

City
WASHINGTON

State
D.C.

Zip Code
20001

FEC ID number of contributing federal political committee.
C 00023580

Name of Employer
Occupation

Receipt For:
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
500000

Date of Receipt

11 / 07 / 2016

Amount of Each Receipt this Period

500000

C. Full Name (Last, First, Middle Initial)

Mailing Address

City
State
Zip Code

FEC ID number of contributing federal political committee.
C

Name of Employer
Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

800000

800000

2016-12-07 03:00:00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE / OF /

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

EMPOWERING EACH COMMUNITY PAC

Full Name (Last, First, Middle Initial)

A.

AMBROSIA CATERERS

Mailing Address

509 Mc CORMICK DRIVE

City

Glen Burnie, Md. 21061

Purpose of Disbursement

EVENT EXPENSE / BAG LUNCHES

Candidate Name

007

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

11 / 08 / 2016

Amount of Each Disbursement this Period

4475.00

B.

CAMPAIGN FINANCE CONSULTANTS

Mailing Address

10 G Street, N.E. #470

City

WASHINGTON, D.C. 20002

Purpose of Disbursement

CONSULTING FEES

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

11 / 02 / 2016

Amount of Each Disbursement this Period

2084.26

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....▶

6559.26

TOTAL This Period (last page this line number only).....▶

2016-11-01 00:00:00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE / OF /

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

EMPOWERING EACH COMMUNITY PAC

Full Name (Last, First, Middle Initial)

A. APPLEGATE FOR CONGRESS

Mailing Address

977A LOMAS SANTA FE DRIVE

City

SOLANA BEACH, CA

State

Zip Code

92075

Purpose of Disbursement

CONTRIBUTION

Candidate Name

DOUG APPIEGATE

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State: CA

District: 49th

Date of Disbursement

10 / 25 / 2016

Amount of Each Disbursement this Period

1250.00

B. FRIENDS OF ANGELA AISO BROOKS

Mailing Address

P.O. BOX 6058

City

UPPER MARLBORO

State

Zip Code

MD 20792

Purpose of Disbursement

POLITICAL CONTRIBUTION

Candidate Name

NOW FED. CANDIDATE A. AISOBROOKS

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

11 / 10 / 2016

Amount of Each Disbursement this Period

1500.00

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2750.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE / OF /

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

EMPOWERING EACH COMMUNITY PAC

Full Name (Last, First, Middle Initial)

A. THE HENRIETTA LACKS LEGACY GROUP

Mailing Address

P.O. BOX 21882

City

State

Zip Code

TURNER STATION, MD. 21222

Purpose of Disbursement

CHARITABLE DONATION

Candidate Name

012

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

11 / 08 / 2016

Amount of Each Disbursement this Period

1,000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1,000.00

20161207 01:00:00



Rate

P

US POSTAGE PAID
\$6.45

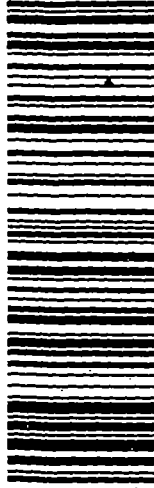
Origin: 20740
Destination: 20463
0 Lb 2.80 Oz
Dec 02, 16
2320520741-13

1024

PRIORITY MAIL ®1-Day

Expected Delivery Day: 12/03/2016

USPS TRACKING NUMBER



9505 5127 1956 6337 0758 11

RECEIVED
FEC MAIL CENTER
2016 DEC -7 AM 11:51

THOMAS A. GENTILE

ATTORNEY

911 SILVER SPRING AVE., STE. 104
SILVER SPRING, MD 20910

TO: Federal Election Commission
999 E Street, N.W.
Washington, DC 20463

Label 1078, July 2013

TRACKED
INSURED

PRIORITY MAIL

UNITED STATES
POSTAL SERVICE®

For Domestic Use Only

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered Date of Receipt

☐ USPS First Class Mail Postmarked
Date of Receipt

☐ USPS Registered/Certified Postmarked (R/C)

☒ USPS Priority Mail Postmarked
12/2/16

☐ USPS Priority Mail Express Postmarked

☐ Postmark Illegible

☐ No Postmark


☐ Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery ☐

☐ Received from House Records & Registration Office Date of Receipt

☐ Received from Senate Public Records Office Date of Receipt

☐ Received from Electronic Filing Office Date of Receipt

☐ Other (Specify): Date of Receipt or Postmarked


PREPARER
(3/2015)

12/7/16
DATE PREPARED

20161207 12:01 PM